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## FEC FORM 2

## STATEMENT OF CANDIDACY

1. (	a) Name of Candidate (in full)								
	Cleaves, Philip, J, Mr, Jr								
(	b) Address (number and street) 34 Lincoln St	☐ Check if address changed				2. Candidate's FEC Identification Number H8ME02136			
(	c) City, State, and ZIP Code					3. Is This	New	Amended	
	Dexter		ME	0493	0	Statement <b>X</b>	(N) OR	(A)	
4. F	Party Affiliation	5. Office Sought				rict of Candidate			
	DEMOCRATIC PARTY	House			ME	02			
	DE	SIGNATION	OF PRI	INCIPAL	CAMPAIGN	N COMMITTEE			
7. I	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)								
ı	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
(	a) Name of Committee (in full)  CLEAVESFORCON	IGRESS							
(	b) Address (number and street) 34 LINCOLN ST								
	c) City, State, and ZIP Code								
	DEXTER				ME	04930			
8. I	DE hereby authorize the following nan	(Inc	cluding Join	t Fundraisir	g Representative	,	d expend funds	on behalf of my	
	candidacy.								
N	NOTE: This designation should be f	iled with the princ	cipal campa	ign committ	ee.				
(	a) Name of Committee (in full)								
(	b) Address (number and street)								
	c) City, State, and ZIP Code								
	I certify that I have exa	mined this Stater	ment and to	the best of	my knowledge a	and belief it is true, co	rrect and comp	lete.	
Signature of Candidate						Date			
Cle	aves, Philip, J, Mr, Jr	[Electronically Filed]				04/19/2017			
NO	<b>FE:</b> Submission of false, erroneous	or incomplete in	formation m	nay subject	the person signir	ng this Statement to p	enalties of 2 U.	S.C. §437g.	

FEC FORM 2 (REV. 02/2009)